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**MOTOROLA**  
**FAX TRANSMITTAL SHEET**

Motorola, Inc.  
Intellectual Property Section  
Law Department  
600 North U.S. Highway 45  
Libertyville, IL 60048

Telephone: (847) 523-2585  
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5

Number of Pages (including this page)

Date: 08/16/2006  
To: Commissioner for Patents  
Location: United States Patent and Trademark Office  
Fax No.: (571) 273-8300  
From: Matthew C. Loppnow Registration No. 45,314  
Subject: Serial No. 09/667,641 Docket No. CM01318I

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Enclosed herewith, please find:

- ☒ Notice of Appeal
- ☒ Transmittal Form
- ☒ Fee Transmittal Form
- ☒ Petition for Extension of Time

**PLEASE GIVE THESE PAPERS TO:**


EXAMINER:  
GROUP ART UNIT:  
SERIAL NO.:  
FILED:  
INVENTOR:

Ton, Minh Toan T.  
2871  
09/667,641  
09/23/2000  
Li et al.

AUG 16 2006

<b>FEE TRANSMITTAL</b>		<b>Complete if Known</b>	
Patent fees are subject to annual revision		Application Number	09/667,641
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	09/23/2000
		First Named Inventor	Li, Zili et al.
		Examiner Name	Ton, Minh Toan T.
		Group Art Unit	2871
<b>TOTAL AMOUNT OF PAYMENT</b>		Attorney Docket No.	CM013181

<b>METHOD OF PAYMENT (check all that apply)</b>				<b>FEE CALCULATION (continued)</b>																																																																																																																											
Check	Credit card	Money Order	Other	None	<b>4. ADDITIONAL FEES</b>																																																																																																																										
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <b>502117</b> Deposit Account Name: <b>Motorola, Inc.</b> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17 <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				<table border="1" style="width:100%"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th></th> </tr> <tr> <th>Fee Code</th> <th>Fee Code</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td></tr> <tr><td>1251</td><td>120</td><td>2251</td><td>60</td></tr> <tr><td>1252</td><td>450</td><td>2252</td><td>225</td></tr> <tr><td>1253</td><td>1020</td><td>2253</td><td>510</td></tr> <tr><td>1254</td><td>1590</td><td>2254</td><td>795</td></tr> <tr><td>1255</td><td>2160</td><td>2255</td><td>1080</td></tr> <tr><td>1401</td><td>500</td><td>2401</td><td>250</td></tr> <tr><td>1402</td><td>500</td><td>2402</td><td>250</td></tr> <tr><td>1403</td><td>1000</td><td>2403</td><td>500</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td></tr> <tr><td>1452</td><td>500</td><td>2452</td><td>250</td></tr> <tr><td>1453</td><td>1500</td><td>2453</td><td>750</td></tr> <tr><td>1501</td><td>1400</td><td>2501</td><td>700</td></tr> <tr><td>1502</td><td>800</td><td>2502</td><td>400</td></tr> <tr><td>1503</td><td>1100</td><td>2503</td><td>550</td></tr> <tr><td>1450</td><td>130</td><td>1450</td><td>130</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td></tr> <tr><td>1808</td><td>180</td><td>1808</td><td>180</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td></tr> <tr><td>1809</td><td>790</td><td>2809</td><td>395</td></tr> <tr><td>1810</td><td>790</td><td>2810</td><td>395</td></tr> <tr><td>1801</td><td>790</td><td>2801</td><td>395</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td></tr> </tbody> </table>				Large Entity	Small Entity	Fee Description		Fee Code	Fee Code			1051	130	2051	65	1052	50	2052	25	1053	130	1053	130	1812	2520	1812	2520	1804	920*	1804	920*	1805	1840*	1805	1840*	1251	120	2251	60	1252	450	2252	225	1253	1020	2253	510	1254	1590	2254	795	1255	2160	2255	1080	1401	500	2401	250	1402	500	2402	250	1403	1000	2403	500	1451	1510	1451	1510	1452	500	2452	250	1453	1500	2453	750	1501	1400	2501	700	1502	800	2502	400	1503	1100	2503	550	1450	130	1450	130	1807	50	1807	50	1808	180	1808	180	8021	40	8021	40	1809	790	2809	395	1810	790	2810	395	1801	790	2801	395	1802	900	1802	900
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<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b> <table border="1" style="width:100%"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fee Paid (\$)</th> </tr> <tr> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Utility</td><td>300</td><td>150</td><td>500</td><td>250</td><td>200</td><td>100</td><td></td></tr> <tr><td>Design</td><td>200</td><td>100</td><td>100</td><td>50</td><td>130</td><td>65</td><td></td></tr> <tr><td>Plant</td><td>200</td><td>100</td><td>300</td><td>150</td><td>160</td><td>80</td><td></td></tr> <tr><td>Reissue</td><td>300</td><td>150</td><td>500</td><td>250</td><td>600</td><td>300</td><td></td></tr> <tr><td>Provisional</td><td>200</td><td>100</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td></tr> </tbody> </table>				Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0		<b>2. EXTRA CLAIM FEES</b> <table border="1" style="width:100%"> <thead> <tr> <th></th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent</td><td>50</td><td>25</td></tr> <tr><td>Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent</td><td>200</td><td>100</td></tr> <tr><td>Multiple Dependent Claims</td><td>380</td><td>180</td></tr> </tbody> </table>					Fee (\$)	Small Entity Fee (\$)	Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25	Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100	Multiple Dependent Claims	380	180																																																						
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<b>3. APPLICATION SIZE FEE</b> If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity) For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(e)(1)(G) and 37 CFR 1.18(s). <table border="1" style="width:100%"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr><td>100</td><td></td><td></td><td></td><td></td></tr> <tr><td>150</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>				Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	100					150					<b>5. OTHER FEE(S) (specify)</b> Non-English Specification: \$130 fee (no small entity discount) <table border="1" style="width:100%"> <thead> <tr> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr><td>\$960.00</td></tr> </tbody> </table>				Fee Paid (\$)	\$960.00																																																																																																							
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<b>SUBMITTED BY</b>		<b>Registration No.</b>		<b>Telephone</b>	
Name (Print/Type): <b>Matthew C. Loppnow</b>		45,314		847-523-2585	
Signature: 		Date: <b>08/16/06</b>			

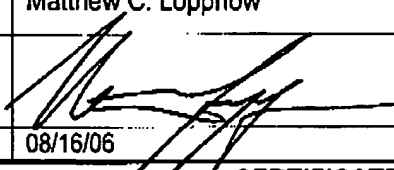
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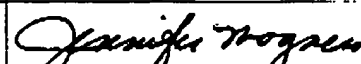
AUG 16 2006

(SB/31 (04-05))

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/667,641
	Filing Date	09/23/2000
	First Named Inventor	Li, Zili et al.
	Art Unit	2871
	Examiner Name	Ton, Minh Toan T.
Total Number of Pages in this Submission	Attorney Docket Number	CM013181

ENCLOSURES		(check all that apply)
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Transmittal Form <input type="checkbox"/> Facsimile Transmittal
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Matthew C. Loppnow	Registration No.	45,314
Signature			
Date	08/16/06		

CERTIFICATE OF TRANSMITTAL/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to facsimile number (571) 273-8300 or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date listed below:	
Typed or printed name	Jennifer Magness
Signature	
Date	08/16/06